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ABSTRACT

This paper reports the development of a structured college health services orientation program manual for new staff nurses at Rancho Santiago College (RSC) in California. The orientation manual is intended to communicate detailed performance expectations, role responsibilities, institutional and departmental policies and procedures and to facilitate a smooth transition and adaptation in a short period of time for new staff. RSC is a large urban Southern California comprehensive community college with approximately 43,000 students and 2 Health and Wellness Centers. The study employed a literature review, a survey of other California community college health services, a modified Delphi technique for data collection, and a panel of RSC health services staff judges for evaluation during product development. The literature review indicated the importance of a structured orientation program. The survey of other institutions found that many components of orientation recommended in the literature were already being implemented, while others were not. The participation of the staff panel of judges fostered awareness of the need for such a manual. The orientation manual that was finally developed included a contents listing, a skills inventory, an orientation checklist, and an orientation evaluation form. Appendixes contain the survey questionnaire, the manual contents list, skills inventory, orientation checklist, orientation evaluation, and survey raw data results. Includes 42 references. (JB)

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DEVELOPMENT OF THE CONTENTS OF AN ORIENTATION PROGRAM FOR NURSES NEW TO COLLEGE HEALTH SERVICES

Governance and Management Seminar

by

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A Practicum Report presented to Nova University in partial fulfillment of the requirements for the degree of Doctor of Education

Nova University

November, 1992

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HE 026 163

Abstract of a Practicum Report Presented to Nova University in Partial Fulfillment for the Requirements for the Degree of Doctor of Education

DEVELOPMENT OF THE CONTENTS OF AN ORIENTATION PROGRAM FOR NURSES NEW TO COLLEGE HEALTH SERVICES

by

Sheila G. Rockoff

November, 1992

A planned and structured college health services orientation program manual can provide an effective and efficient means of communicating detailed performance expectations, role responsibilities, and institutional and departmental policies and procedures for newly employed nurses. The purpose of this study was the development of the contents of an orientation program for newly employed nurses within college health services. The anticipated outcome of an orientation program is to facilitate a smooth transition and adaptation into the new role and setting within a relatively short period of time.

The two Health and Wellness Centers within the Rancho Santiago College Community District lacked a structured and organized orientation program. The district, known as Rancho Santiago College (RSC), is a large comprehensive public community college. Located in a large urban area of central Orange County of Southern California, RSC is

comprised of two campuses and two educational centers. The district has a single college, multi-campus organizational and governance structure.

The purpose of this study was the development of a valid product. The product was the contents of an orientation program for newly hired nurses within health services at RSC. The research questions asked: What is the appropriate content of an orientation program for college health services at Rancho Santiago College?

The design of this study employed a literature review, a survey of other California community college health services, a modified Delphi technique for data collection, and a panel of judges for formative and summative evaluation during product development. The panel members were selected from within RSC health services staff in order to promote staff participation and collaboration in the development of the product.

The outcome of this study answered the research question and produced a realistic and useable product. Recommendations included the dissemination of the study to all health services staff, and implementation of the product in the orientation of newly hired nurses within RSC health services.

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Chapter 1

INTRODUCTION

Background and Significance

Rancho Santiago College recently expanded its college health services, with the opening of a second Health and Wellness Center, at a second campus. As a consequence of this expansion, and the need to hire additional nurses, the lack of a formal, planned, and structured orientation program surfaced. A formalized orientation program for nurses new to RSC health services is essential to provide for the inherent adjustments to a new setting and patient care delivery system, and for indoctrination to the required role performance expectations and standards, policies and procedures, the institution, and the Health and Wellness Centers.

This study determined the essential contents required of a college health services orientation program for newly hired nurses. The purpose of this study was the development of the contents of a planned and structured orientation program for newly employed nurses within RSC health services.

Rancho Santiago College is a comprehensive community college, located in a large urban area of central Orange County in Southern California, characterized by a significant cultural and socioeconomic diversity. The

Rancho Santiago Community College District is comprised of two campuses and three continuing education non-credit centers, with a total district enrollment of over 43,000 students. The district has a single college, multi-campus organizational and governance structure, and is known as Rancho Santiago College (RSC). The larger campus is the Santa Ana Campus, with a Spring 1992 enrollment of 25,000 students. The newer Orange Campus had a Spring 1992 enrollment of 7,500 students (Rancho Santiago College, 1992).

RSC health services is comprised of two Health and Wellness Centers, one at each campus. Under the single college, multi-campus structure, a single program manager is responsible for both Health and Wellness Centers. Health services has one fulltime administrative clerk and one fulltime registered nurse (in addition to the program manager), with twenty-three parttime staff comprised of clerks, nurses, physicians, and psychologists. The recent expansion of health services, with the opening of a second Health and Wellness Center at the newer campus resulted in the need for a formalized and structured orientation program for newly hired nurses. An orientation program could potentially enhance the performance, efficiency, and effectiveness of nurses new to college health services, including the quality of health services provided and delivered to students.

An orientation program provides definitive staff performance expectations and guidelines for role accountability and responsibility. Such a program, according to Nardecchia and Myers (1980), and Wolper and Pena (1987), is necessary for the maintenance of consistent practice standards, efficiency and effectiveness in providing health care, role accountability, and performance expectations. A college health services orientation program could facilitate the newly employed nurse's adaptation to college health, as a patient care delivery system, and bridge the process of adjustment and socialization into college health services at RSC.

The orientation of new staff is a managerial role responsibility and accountability function. Development of an orientation program involves planning, establishing standards, guidance in role acquisiton, identification of learning needs, and the evaluation of staff competency to function independently and autonomously. Orientation of new staff is the responsibility and authority of managers, with delineation of the realities and expectations of nursing practice within a department and the organization (Dienemann, 1990). An effective and comprehensive orientation program identifies performance deficiency learning needs, in order to provide the necessary instruction and guidance, to facilitate performance at the expected level within a short period of time. According to

Arthur (1991), Buickus (1984), and Rebore (1991), the induction and orientation of new nurses is the responsibility of managers, and has a direct relationship between actual job performance and meeting role expectations.

Nursing standards, as delineated by the American Nurses Association and described by Patterson, Kranz, and Brandt (1986), state "... new nursing personnel are to receive an orientation of sufficient...content to prepare them for their specific duties and responsibilities...and...to provide...any necessary instruction before they administer direct patient care" (p. 112). It is the responsibility of nurse managers to ensure that standards are established and maintained, and competent patient care is delivered through an orientation that clearly communicates and demonstrates performance expectations (Barnum & Mallard, 1989; Heisler, Jones, & Benham, 1988; Nadler & Nadler, 1990).

The development of the content of an orientation program for college health services correlates with management concepts and issues presented in the Nova University, Governance and Management Seminar. As presented in this seminar the planning process is focused on designing and shaping the future, and the management process is focused on coordinating human resources to achieve the designed plan. An orientation program provides for the

inherent managerial responsibility and authority for the performance and role expectations of new staff members.

As stated by Hersey and Blanchard (1988), management is the process of working with and through others to accomplish goals, and includes the functions of planning and organizing. Planning involves setting goals and objectives, and delineating how to accomplish identified goals and objectives by bringing resources together. Planning, according to Jedamus and Peterson (1986), is defined as a process that assesses a current state and the development of strategies, policies, and procedures for accomplishing a desired state. Organizing, according to Hersey and Blanchard (1988), involves the integration of resources to obtain identified goals and objectives, which in turn, influence role performance and the desired state.

This study used a developmental problem-solving methodology to determine what content should be included in a college health services orientation program. The product of this study, the contents of an orientation program manual, identified what should be included in an orientation program, for newly employed nurses, within health services at RSC.

Research Question

The research question: What is the appropriate content of an orientation program for nurses new to college health services at Rancho Santiago College?

Objectives

The objectives of this product developmental study were:

1. To increase staff awareness and comprehension of the purpose and need to develop the content of a health services orientation manual.

2. To facilitate staff interest and motivation in participatory collaboration in the formation of a health services orientation manual.

3. To provide staff participation in identifying what should be included in an orientation program manual for nurses new to college health services at Rancho Santiago College.

4. To develop the contents of an orientation program manual for newly hired nurses within RSC college health services.

Chapter 2

LITERATURE REVIEW

A planned and structured orientation program is essential to provide a formal process for new employees to become familiar and comfortable within a new work setting. An orientation program provides an effective and efficient means of communicating specific detailed job performance expectations, and familiarity with departmental and institutional policies and procedures (Wolper & Pena, 1987). An informed and knowledgeable employee, who knows the what, why, how, and when of their role, becomes integrated into the system and will begin to function in an autonomous role, with minimal time required (Asay & Maciariello, 1991).

Orientation is defined by Cascio (1986) as the "...familiarization with and adaptation to a situation or environment" (p. 213). According to Nowak and Grindel (1984), orientation provides a transition period, with structured guidance, to promote a smooth adjustment to the new environment. This can help to lessen the cultural shock and reduce the stress experienced by new employees as they adapt to the new setting and adjust to the new work environment, and by providing a smooth and easy transition ((Brown, 1987; Cascio, 1986; Barnum & Mallard, 1989).

As stated by Douglas (1992), orientation is the formal process of apprising the new employee of the organization and their role in meeting goals of the department and the

organization. Webb, Geer, Montello, and Norton (1987), describe orientation as the process by which an employee becomes aware of the various components of the position, which in turn facilitates an effective and efficient transition into their respective role within the organization. A planned orientation, according to Haggard (1984), leads to optimum employee effectiveness in the least time possible. Orientation is the process that familiarizes new employees with the organization, the job itself work group (Caruth, Noe, & Mondy, 1988).

Orientation, according to Barnum and Mallard (1989), is a method of introducing new personnel to the organization and is a critical time of adjustment to policies, procedures, rules, how things are done, and the prevailing organizational culture. The transitional period, which orientation provides, leads to increased confidence, productivity, and responsibility for the new employee (Nowak & Grindel, 1984). This allows them to acquire the knowledge, skills, and attitudes that enable them to function effectively and comfortably in a new work environment (Seyfarth, 1991).

The new employee cannot fully focus on job performance until familiar with the surroundings and comfortable with the details and routines of the new position and role, and the development of an understanding of departmental and organizational expectations (Arthur, 1991). Orientation

allows the new employee to learn about the organizational purpose and functions, to identify with their new role and job expectations, and to begin the socialization necessary to become a member of the group (Brown, 1987; Caruth et al, 1988; Holoviak & Sipkoff, 1987); Seyfarth, 1991; Snook, 1992). According to Cascio (1986) and Haggard (1984), new employees need specific information of organizational standards, expectations, norms, traditions, policies, social behavior and conduct, and technical aspects of the job.

Socialization of new employees is a process of adaptation to the new environment, including work duties and activities, new boss, new co-workers, and a different set of standards and expectations. This socialization process allows for adjustment to the new organizational culture by conveying how things are done, what skills are valued and important to the department and organization, and helps to define the new role within the organization (Butler, Ferris, & Napier, 1987; DeCenzo & Robbins, 1988). Through this process of acculturation the new employee learns their role expectations and performance standards within the new organization (Wolper & Pena, 1987).

The purpose and objective of an orientation program is to provide a period of time for socialization and acculturation into a new work setting. This encompasses the learning of new procedure, methods, policies, protocols, customs, and traditions as they relate to the role, duties,

and responsibilities (Caruth et al, 1988), in order for the new employee to gain the information necessary to function comfortably and effectively within a new setting (Douglas, 1992). An orientation program can provide a uniform and consist standardization of indoctrination for all newly hired staff (Wopler & Pena, 1987), and for the teaching-learning of any tasks or skills requisite to the new position (Swansburg, 1990).

College Health Nursing

College health, as an ambulatory care delivery system, requires specialized cognitive knowledge and psychomotor nursing skills. Nurses new to this type of patient care delivery system require instruction and guidance in developing the appropriate clinical skills, and comprehension of the health needs of college students, with related emphasis on health teaching and wellness promotion (American College Health Association, 1990). Nurses need an orientation not only to the environmental clinical setting, but familiarization with policies and procedures related to the nursing care delivery system, and the specific knowledge and skills necessary for competent clinical practice within the setting (Nadler & Nadler, 1990; O'Conner, 1986).

The orientation of nurses requires time for socialization into the delivery system philosophy, and to provide for adjustment and acquisition of nursing tasks and skills specific to the position and the setting (Douglas,

1992; Huang & Schoenknecht, 1984; Swansburg, 1990). A planned and structured orientation program provides for individualized learning needs and the guided acquisition of necessary skills and knowledge inherent in the delivery of effective and efficient nursing care. This leads to increased productivity, responsibility, and confidence in a relatively short period of time (Douglas, 1992; Nowak & Grindel, 1984; Swansburg, 1990).

An orientation program for nurses, which is planned and organized with meaningful components, can build a positive identification with the organization and establish a relationship that nurtures individual talents and builds a team with interactive qualities. In addition, the orientation process provides interpersonal support for the new nurse while clinical competency is mastered. This establishes performance standards and role expectations of the position, fosters self-confidence, and job satisfaction (Asay & Maciariello, 1991; Haggard, 1984; Nadler & Nadler, 1990; O'Conner, 1986; Wolper & Pena, 1987).

It is a managerial responsibility to ensure each new nurse understands their job duties, role expectations, performance standards, policies, procedures, and general information about the department and the organization (Caruth et al, 1988). Nurse managers should plan and implement an orientation to facilitate experiences to provide a smooth transition into the department (Barnum &

Mallard, 1989; Wolper & Pena, 1987). The results of a survey conducted for the current study found seventy-three percent of directors/coordinators of California community college health services took responsibility for planning, directing, and organizing orientation programs for newly hired nurses.

Although orientation is a managerial responsibility, the execution is often delegated to staff as a shared team effort (Seyfarth, 1991; Webb et al, 1987). Managers should encourage high performance standards and role expectations (Seyfarth, 1991), while concurrently eliciting staff cooperation and involvement in the planning and implementation of an orientation program (Williams, 1992). The results of a survey conducted for this current study found that twenty-seven percent of California college health services managers delegated orientation to staff nurses.

Staff cooperation, according to Williams (1992), emerges from a process that empowers them and in which they feel they own the problem and the solution. Staff have valuable ideas about orientation and a stake in the new employees successful adaptation and socialization (Haggard, 1984). Enlisting staff, as stake holders, helps foster their input of relevant information and ideas, and facilitates their support, active interest, and participation in the process (Haggard, 1984; Schultz & Johnson, 1990; Webb et al, 1987). According to Haggard

(1984), employees who have recently been orientee's themselves are an invaluable source of information in planning an orientation program.

A nurse manager must delegate implementation of an orientation program to a capable staff member, based on their position and expertise (Webb et al, 1987; Wolper & Pena, 1987). Staff members are the primary source of information for new employees, and can assist new staff in becoming integrated into the work setting (Caruth et al, 1988; Webb et al, 1987). Staff as mentors, who are paired as a buddy with the orientee, provide the necessary guidance and instruction (Huang & Schoenknecht, 1984; Webb et al, 1987).

Seyfarth (1991) and Huang and Schoenknecht (1984), suggest selecting mentors based on their expertise and ability to act as a role model, resource person, teacher, and friend, and who encourage high performance standards and role expectations. A mentor introduces the orientee to colleagues, helps in the learning and completion of tasks, demonstrates and teaches new clinical procedures, alerts staff to experiences the orientee needs, answers questions, and makes recommendations about increasing or decreasing orientation time and content (Huang & Schoenknecht, 1984). The results of a survey conducted for the current study found that a majority of California community college health services utilize a buddy-system to orient new nurses.

Content

As the purpose of an orientation is to assist the new employee in adapting to the new setting and role, the program must have clearly stated objectives (O'Conner, 1986; Wolper & Pena, 1987). Objectives should be clearly defined to reflect the philosophy of the institution and the department, and the needs of the new employee (Rebore, 1991).

Rebore (1991), suggests the following universal objectives, which are common to all orientation programs (p. 137):

1. To make the employee feel welcome and secure.
2. To help the employee become a member of the team.
3. To inspire the employee towards excellence in performance.
4. To help the employee adjust to the work environment.
5. To provide information about the community, the institution, department, students, faculty, and staff.

Wolper & Pena (1987), emphasize that all information necessary to acquaint new employees with their job and the institution must be presented at the onset of employment. This includes objectives to provide for the acquisition of knowledge to function effectively, and the development of skills to perform according to established standards and expectations. O'Conner (1986), stresses the importance of providing an orientation to both experienced and neophyte

nurses so that they can become full contributing members of the department as quickly as possible.

An orientation for nurses should be planned to address common nursing practice standards directly related to the nursing care delivery system and the setting. Objectives of an outpatient ambulatory care setting, such as college health services, should include first-aid, emergency care, psychological counseling, crisis intervention, and health behaviors assessment with related teaching and health education (Galindez, 1990).

Orientation programs, according to Douglas (1992), should be designed to convey information helpful to the new nurse. This would encompass three types of information as related to the setting and the position. These are: (1) the organizational mission, goals, physical facilities, and how the employees job contributes to organizational needs and philosophy; (2) general and specific information about role expectations and the work routine; and (3) a detailed presentation of policies, work rules, and standards. A survey conducted for the curent study found that most California community college health services utilized several methods to impart information. The methods identified included the use of policy and procedure manuals, statements of philosophy, employee handbook, organizational charts, job descriptions, and job duties.

Once objectives have been identified the next stage in the planning of an orientation program is to determine the content. This includes consideration of a needs assessment to identify and determine what a new employee needs, specifying content areas, sequencing of content components, training in specific tasks and skills, and the timing and duration of the orientation (Cascio, 1986; Cascio, 1987). New employees need specific information in three major areas on organizational and departmental levels. The areas are: (1) mission, purpose, policies, tradition, performance standards and expectation; (2) social behavior, work climate, and socialization; and (3) the technical aspects of the position and role responsibilities (Cascio, 1986). The results of a survey conducted for the current study found that almost all California community college health services utilize some method to assess the skills, competency, and learning needs of newly hired nurses.

As stated by Addams (1988), an effective orientation program depends on clear, concise explanation of essential policies, procedures, structures and systems. Inherent in this process is recognizing that information is best comprehended and retained if dispersed over time and in segments (Addams, 1988; Seyfarth, 1991).

By sequencing orientation in stages, over several weeks, the new employee does not become sensory overloaded with too much information. This also enables opportunities

to work and perform in the clinical setting while learning and becoming familiar with policies and procedures. Sequencing and spacing orientation activities gives the new nurse opportunities to perform and experience new procedures, and to become comfortable and competent in the new setting (Fowler, 1983; Haggard, 1984).

Implementation

Orientation should include departmental explanations pertaining to responsibilities, structure, reporting relationships, the interrelationship between health services and other institutional departments, and the institutional governance and management structure (Arthur, 1991). Components of an orientation for nurses is enhanced by the use of an orientation manual, informational films, and literature (Snook, 1992; Wolper & Pena, 1987), and the use of policy and procedure manuals (Webb et al, 1987).

An orientation manual is a helpful tool to structure and organize an orientation program. The use of a three-ring binder, which can easily be updated by adding or deleting as the need arises, is recommended. Such a manual can include necessary and essential information pertaining to orientation, including philosophy, mission, objectives of the orientation program, department and institutional organizational charts, job descriptions, and work duties (Huang & Schoenknecht, 1984). The results of a survey conducted for the current study found minimal use of an

orientation manual by California community college health services.

As nursing requires competency in many skills and techniques, O'Conner (1986) suggests using a performance based orientation program, which focuses on the skill necessary to function at a baseline competency level. A performance based orientation identifies common departmental situations encountered and tasks to be mastered. A performance checklist forms the basis of the orientation, and addresses what learning content needs a new nurse requires (Haggard, 1984; O'Conner, 1986). The results of a survey conducted for the current study found minimal use of an orientation performance checklist by California community college health services.

The use of an assessment skills inventory checklist provides a guide for meeting individualized orientation needs, through the assessment of knowledge and abilities, and the identification of learning needs. A skills inventory is the initial process of planning orientation to provide opportunities for learning and performing new procedures. The performance must be observed and validated, with feedback on effectiveness and competency, and assurance performance standards are maintained. New employees need opportunities to learn and practice in the new setting, and to receive feedback on their performance (Addams, 1988; Asay & Maciariello, 1991; Haggard, 1984; Schultz & Johnson,

1990). The results of a survey conducted for the current study found limited use of an orientation assessment skills checklist by California community college health services.

Once learning needs and skills are identified, the new nurse is paired with an experienced staff member on a buddy-system, to give guidance and direction in the performance and learning of procedures, tasks, routines, and skills (Haggard, 1984; O'Conner, 1986; Wolper & Pena, 1987). Identified learning needs can be taught and learned in a variety of ways. Tappen (1986), suggests choosing a method that suits the needs and the situation. Various methods include a brief explanation, demonstration, a return demonstration, or referral to written information. The results of a survey conducted for the current study found methods used by most California community college health services were demonstration, supervised performance, and referral to literature and professional journal articles.

The sequencing of content should be systematic and planned. The first day should involve introduction to the work setting and co-workers, with a tour of the department and the institution. In addition, the first day should include an introduction to the employee handbook and the completion of a skills inventory checklist (Arthur, 1991; Cascio, 1986; Huang & Schoenknecht, 1984; Snook, 1992; Wolper & Pena, 1987).

Subsequent orientation should be organized with a balance between introduction to policies and procedures, and actual clinical activities with an assigned buddy (Asay & Maciariello, 1991). The orientation should conclude with an evaluation of the orientation program (Haggard, 1984).

Evaluation

The use of an orientation checklist monitors and identifies progress towards completion of the orientation, with acquisition of skills and procedures that are vital to a successful orientation. Although orientation is often delegated to staff, the evaluation of the orientees progress is the responsibility of the nurse manager. The manager should meet with the new nurse on the first and last day of orientation. The use of an orientation checklist enables the manager to identify strengths and weaknesses in performance, and to evaluate the successful implementation and completion of the orientation program (Haggard, 1984; Huang & Schoenknecht, 1984; Swansburg, 1990). A survey conducted for the current study found that very few California community college health services utilized an orientation checklist.

The measurement of a successful orientation program should focus on employee performance. As described by Haggard (1984), an evaluation should measure if the orientation objectives were met, and if the new employee is performing at an expected level. Changes to the orientation

program are made based on evaluation and input from orientees and staff members. Revision to content, organization and sequencing should be a constant process with measurable results (Haggard, 1984; Schultz & Johnson, 1990). The results of a survey conducted for the current study found that most California community college health services do not evaluate their orientation program. The predominant methods utilized were found to be an interview with the nurse, self-report by the new nurse, and observation of performance by the nurse.

Summary

A well designed orientation program can provide an effective and efficient means of identifying job performance expectations and familiarize new employees with departmental policies and procedures. An orientation program can facilitate socialization and acquisition of role identification within a new setting, in a relatively short period of time.

The literature supports the use of a planned and organized orientation program, including an orientation manual. This manual should include such items as objectives, philosophy, an orientation checklist, skills inventory assessment, policies, procedures, job duties, and a measurement to evaluate the orientation program.

The results of a survey conducted for the current study found that most California community college health services

do not utilize an orientation manual, nor do they utilize performance assessment-evaluation methods. The survey and the review of the literature conducted for this study support the need to develop appropriate content for an orientation program manual to meet the specific needs of college health services at RSC.

Chapter 3

METHODOLOGY AND PROCEDURES

Design

This study used a developmental problem-solving methodology to develop the content for an orientation program to college health services at RSC. A development problem-solving methodology is used in situations where the solution to a problem is a product (Grizzle, 1990; Rankin, 1990; and Robinson and Woolf, 1991). In this study the problem was the lack of an orientation program for health services. The product of this study was the development of the content for an orientation program manual for college health services at RSC.

A knowledge base of the nature and content of an orientation manual was established from a review of the literature, to determine what constitutes an orientation program manual, and a questionnaire survey of other California community college health services. This included the purpose and value of such a manual, and the how and the what of developing an orientation program for college health services.

As suggested by the practicum proposal evaluator a small survey was conducted to gain information from other California community college health service managers on how they orient new nurses. Developmental studies are based upon supported concepts, such as a literature review and

reports of similar experiences in other environments (Grizzle, 1990). This survey was conducted subsequent to the literature review, and prior to beginning data collection.

The questionnaire survey developed for this study was based on the review of the literature. The questionnaire was developed with assistance of three selected experts from within the institution, and one expert selected external to RSC. The three internal experts selected were the director of institutional research, the dean of student services, and a nurse within the Health and Wellness Center. The external expert was a collegial director of health services at a nearby community college. Utilizing a modified Delphi technique, a draft questionnaire was developed and presented to each expert individually. Suggestions were made to clarify terminology and to restructure some of the questions. Revisions were made and a finalized questionnaire was presented to each expert for a second review and their comments. Consensus was obtained and the final form of the questionnaire was developed. This finalized form was pre-tested by three local community college directors of health services. These three were chosen as they were not in the pre-selected sample for data collection. They were mailed a cover letter and questionnaire. This pre-testing identified a problem with one question that resulted in unuseable data. This question

was revised. Two written comments resulted in the addition of an option choice to two questions. Once these changes and additions were incorporated into the questionnaire, the questionnaire was finalized (Appendix A).

A total of fifteen California community college health service managers were selected for this survey based on the size and similarity of their institutions to RSC. The sample was determined by selecting larger community colleges throughout the state, with five each in northern, central, and southern California. The cover letter and questionnaire was mailed with a stamped return envelope and a form requesting results (Appendix A). Eleven responses were received, for a seventy-five percent response rate. A second mailing was not deemed necessary.

Subsequent to a review of the literature, and the tabulation of the data results of the survey, the procedures for identifying the appropriate content of a college health services orientation program manual was formulated. This included developing a preliminary content listing and selection of a panel of judges.

The literature encourages the involvement of staff in the planning and developing of departmental procedures. Staff participation can provide valuable input vital to the success of the product developed and promotes their acceptance and compliance of the product developed. As stakeholders in the development of the product, staff become

motivated to participate and become active supporters during the implementation process. Therefore, the panel of judges for this study was chosen from among the internal departmental staff, as opposed to selection external to the department or the institution.

A total of five health services staff nurses were selected for the panel. The five nurses chosen were the only fulltime nurse and four of the parttime nurses. Of the parttime nurses, three represented one Health and Wellness Center (Santa Ana campus), and one represented the second, smaller Center (Orange campus), providing representation from each Health and Wellness Center. These health services nurses were selectively chosen to represent the total complement of fourteen health services nurses. They had the most expert knowledge of RSC health services, and the ability to identify departmental needs, acting as expert judges. One was selected because she was recently hired and could offer invaluable information and suggestions for an orientation program.

The task for this panel was to identify the needs of newly hired nurses within the Health and Wellness Centers. A small number of panel members were selected in order to foster consistent participation throughout the data collection, which was conducted over a period of nine weeks. The objective was for them to give input into the formative development of the content of a departmental orientation

program manual, and to give a summative evaluation in order to validate the final product developed.

To foster participation and staff collaboration in this study, a modified Delphi technique was chosen for data collection. The Delphi technique is a useful data collection method for determining priorities and to quantify expert judgments. Participants are asked to participate and complete a series of questionnaires. The responses are collected, and the results summarized and returned to the panel members. After each evaluative review the panel members may change their previous responses. This process is repeated several times, until the resulting data is a consensus of the panel (Isaac and Michaels, 1981; and Treece and Treece, 1987).

A modified Delphi technique was utilized for data collection and the formative evaluation of this study in order to plan a course of action, find consensus, and attempt to predict orientation needs. The advantages of using this technique are the minimal time demands on the panel, the ability to conduct a study without meetings, and the ease of obtaining represented general consensus (Treece and Treece, 1987). As it was not feasible to convene meetings of the panel, this method of data collection and participative formulation of the product develop was most realistic and workable. Using the modified Delphi technique provided the vehicle for using written communications.

Memo's were employed to communicate with, and obtain input from, panel members. A series of three questionnaire content listings were disseminated, over a period of nine weeks. These series of lists permitted data collection, and were the formative evaluations of this study and the resultant product that was developed.

In the modified Delphi technique the panel is presented with an established listing and asked to rate the items (Isaac and Michaels, 1981). The first memo identified the purpose and intent, and asked for their participation in the development of the content for a departmental orientation program manual. This first review included a preliminary content listing, skills inventory, orientatiaon checklist, and an orientation evaluation form as a starting point for this developmental study.

Subsequent to this first review the panel responses were compiled and summarized. The revised items were then sent to the panel members for a second review. Following this second review by the panel members their recommended modifications were made and a revision of the content items was completed. This third revision was presented to the panel members for further review and comments.

The procedure for validating the final product was accomplished by asking the panel members, acting as judges, to evaluate the content of an orientation program manual. As a summative evaluation, this third review by the panel of

judges determined the finalized content, and the product of this developmental study.

Assumptions

In this study, the assumption was made that the panel of judges would give a reliable and valid evaluation of the product. Staff, according to Nardecchia and Myers (1980), who have a stake in the development and ownership of a product, are motivated to participate in the product developed.

Limitations

A limitation of this study was the imperfect validity of the criteria established to identify what should be included in a college health services orientation program manual. An additional limitation was the inability to generalize the product to other settings.

Chapter 4

RESULTS

This developmental study was designed to produce a product to solve a problem for the RSC Health and Wellness Centers. The problem was the lack of an orientation program content for health services. Recent expansion of health services, with the opening of a second Health and Wellness Center at a second campus, resulted in the need for a structured and organized orientation program for newly hired nurses. Both Health and Wellness Centers are under the same program manager, and some staff members work at both Centers. This resulted in the need to develop an orientation program manual to guide and establish uniform orientation standards and expectations. Consequently, the need to develop the content of a health services departmental orientation program manual was identified by the program manager.

The purpose of this developmental study was to develop the content of an orientation program manual. It was anticipated this proposed content, as the product of this study, would be the content necessary for the development of a health services orientation program manual at RSC.

The research question asked: What is the appropriate content of an orientation program for nurses new to college health services at Rancho Santiago College? The methodology used to answer this question was a review of the literature,

development of a questionnaire and survey of other California community college health services orientation programs, use of a modified Delphi technique, and selection of a panel of judges. The product produced as an outcome of this study was the content for a health services orientation program manual at RSC.

This developmental study began with a review of the literature. The literature revealed consist emphasis on the necessity and importance of a structured orientation program to provide an effective and efficient means of communicating detailed job performance expectations, and departmental policies and procedures, to newly hired staff members. Orientation is the process that familiarizes new employees with the organization, the department, and the job itself. Also stressed in the literature was the need to allow new staff members time to acquire the knowledge and skills, which enable them to function effectively and comfortably in a new work setting. An orientation program can provide a uniform and consist standardization of indoctrination for new staff, and for the teaching-learning of any tasks or skills requisite to the new position. The literature emphasized that an orientation manual can provide guidelines for performance expectations and role responsibilities with improvement in departmental efficiency and effectiveness.

Questionnaire Survey

In addition to a literature review, a questionnaire was developed to survey other California community college health services in order to gain information on how and what methods were used to orient new nurses. The results of this survey revealed that many components of orientation recommended in the literature were being implemented, while others were not being utilized.

The survey questionnaire was mailed to fifteen pre-selected California community college health services program managers. The questionnaire was comprised of multiple choice questions requiring a yes or no response (Appendix A). The return response rate was seventy-three percent, with eleven questionnaires returned. The data was manually tabulated and analyzed using descriptive non-inferential statistics.

Question 1 asked who was responsible for orientation of new nurses. The findings found that seventy-three percent (N=8), of the program managers, as directors or coordinators, were responsible for orientation of new nurses. Eighteen percent (N=2) of the respondents indicated an assistant director was responsible for orientation. These results, as shown in Table 1, indicate that nine percent (N=1) placed the responsibility of orientation with a staff nurse.

Table 1

Responsibility for Orientation

Title	No.	%
Director/Coordinator	8	73
Assistant Director	2	18
Staff nurse	1	9

Question 2 asked what preceptor method was used to orient new nurses. The findings revealed that fifty-four percent (N=6) used a buddy system, with thirty-six percent (N=4) using multiple staff nurses and eighteen percent (N=2) using one specific nurse. Forty-six percent (N=5) used on-the-job training, with no structured perceptor or buddy system method. These results are shown in Table 2.

Table 2

Preceptorship Methods Utilized

Method	No.	%
No structured system	5	46
Buddy system with		
multiple staff nurses	4	36
one specific nurse	2	18

Question 3 asked what methods were used to assess the skills, competency, and learning needs of new nurses. The results revealed that nine percent (N=1) used a skills inventory checklist, and ninety-one percent (N=10) used an interview method. Observation of clinical performance was used by eighty-two percent (N=9), and fifty-five percent (N=6) used a self-report by the new nurse. As shown in Table 3, these findings reflect more than one option choice, resulting in multiple methods being utilized by the respondents.

Table 3

Methods used to Assess Skills, Competency, and Learning Needs

Method	No.	%
Interview with new nurse	10	91
Observation of Clinical Performance	9	82
Self-Report by the New Nurse	6	55
Skills Inventory Checklist	1	9

Note. Reflects multiple choice options

Question 4 asked what methods were used to teach clinical skills. Supervised performance was used by eighty-two percent (N=9) of the respondents. Demonstration with instruction and referral to journal articles were each used

by seventy-three percent (N=8) of the respondents. No respondents used films or video to teach clinical skills. As shown in Table 4, these findings reflect more than one option was selected, resulting in multiple methods being used by the respondents.

Table 4

Methods used to Teach Clinical Skills

Method	No.	%
Supervised Performance	9	82
Demonstration with Instruction	8	73
Referral to Journal Articles	8	73
Use of Films or Videos	0	0

Note. Reflects multiple choice options

Question 5 consisted of fourteen options, asking which items were used to orient new nurses. The respondents selected daily work routine and duties, and a map of their campus, as the most frequently used items with a response of ninety-one percent (N=10). The next most frequently used items, with a response of eighty-two percent (N=9) each, were a policy and procedure manual, job description, and departmental philosophy. Sixty-four percent (N=7) used an institutional organization chart, and forty-five percent (N=5) of the respondents utilized an employee handbook,

departmental organizational chart, and institutional philosophy. Orientation objectives were used by thirty-six percent (N=4), and an orientation checklist and orientation manual were used by eighteen percent (N=2) of the respondents. The least selected item, used by nine percent (N=1) of the respondents, was a skills inventory checklist. As found in Table 5, these responses reflect multiple options being selected by the respondents.

Question 6 asked what methods were used to assess the readiness of a nurse to conclude orientation and to function with minimal supervision. Observation of clinical performance and an interview with the new nurse were methods identified by ninety-one percent (N=10) of the respondents. A self-report by the nurse was identified by seventy-three percent (N-8), of the respondents. An orientation checklist was used by nine percent (N=1), of the respondents. As found in Table 6, these findings reflect more than one option choice, resulting in multiple methods being utilized by the respondents.

Table 5

Items Used to Orient New Nurse

Items	No.	%
Map of Campus	10	91
Daily work routine and duties	10	91
Policy and Procedure Manual	9	82
Job descriptions	9	82
Philosophy of department	9	82
Organizational chart of institution	7	64
Employee handbook	5	45
Organizational chart of department	5	45
Philosophy of institution	5	45
Objectives of orientation	4	36
Orientation checklist	2	18
Orientation manual	2	18
Skills inventory checklist	1	9
Scavenger hunt	0	0

Note. Reflects multiple choice options

Table 6

Methods Used to Assess Readiness of Nurse to Conclude Orientation

Items	No.	%
Observation of clinical performance	10	91
Interview	10	91
Self-report by nurse	8	73
Orientation checklist	1	9

Note. Reflects multiple choice options

Question 7 asked what evaluation methods were used to determine the effectiveness of the respondents orientation program to prepare new nurses for their role and responsibilities. An interview with the new nurse was used by ninety-one percent (N=10) of the respondents, and eighty-two percent (N=9) observed clinical performance. A performance evaluation was used by eighteen percent (N=2) of the respondents. As found in Table 7, a written questionnaire and a post-test were not used, as none of the respondents selected either of these two methods. These findings reflect more than one option choice, resulting in multiple methods being utilized by the respondents.

Table 7

Methods Used to Evaluate effectiveness of Orientation

Items	No.	%
Interview with nurse	10	91
Observation of clinical performance	9	82
Performance evaluation	2	18
Written questionnaire	0	0
Written post-test	0	0

Note. Reflects multiple choice options

Formative Evaluation

The remainder of this study was conducted using a modified Delphi technique. As suggested in the literature a panel of judges was selected from among the RSC health services nursing staff. This provided for staff participation and collaboration in the formation of the product developed.

Based on the information obtained from the literature review and the results of the questionnaire survey, four orientation content items were developed. These four items were: 1) an orientation manual content list; 2) a skills inventory checklist; 3) a nursing orientation checklist; and 4) an orientation evaluation form. These preliminary drafts were presented to the panel of judges as a total package,

via a memo, for their comments, suggestions, and recommendations. Each subsequent review presented to the panel members included all four of these items.

Orientation Manual Content List

The preliminary draft of an orientation manual content list presented to the panel of judges was organized according to the orientation sequence suggested in the literature. Most items on this list were already developed, and readily available, for inclusion in an orientation manual. Three items needed to be developed (a skills inventory, an orientation checklist, and an orientation evaluation form), as the outcome of this developmental study.

Each panel member participated by returning the first review with their suggestions and comments. Panel members responses included adding specific job descriptions for all positions within health services. Another recommendation was to alphabetize the list. These suggestions were incorporated into a revised content list and presented to the panel for a second review and their comments. All panel members agreed on the addition of specific job descriptions, but recommended the content list not be alphabetized, but kept in logical sequential order. The third review by the panel of judges resulted in group consensus and the content list was accepted in its final format (Appendix B).

Skills Inventory Checklist

The skills inventory checklist was organized with four main areas to assess the clinical competency and learning needs of new nurses. The first review by the panel of judges resulted in suggestions to include additional items, and to add name and date spaces. These suggestions were incorporated into a revision submitted to the panel for their second review. This second review by the panel members resulted in suggestions that subcategory items be alphabetized. Panel consensus was subsequently obtained and the skills inventory list was accepted in its final form (Appendix C).

Nursing Orientation Checklist

The initial draft of the orientation checklist was organized with four general sections, and subcategories listed under the main headings. The first review by the panel members resulted in numerous recommendations and suggestions for additional items, the addition of two general sections, a space for name and date of employment, and the elimination of duplicate items. These suggestions were incorporated into a second revision. The second review by the panel members resulted in additional suggestions and comments to tighten the format and to make this checklist a working orientatiaon guide. It was suggested that check-mark spaces by made, to include a completion date, and to add directions on how to use the checklist. Recommendations

were also made to use lines to separate the general sections, and to add additional tasks. All of these recommendations were compiled into a third revision and submitted to the panel for review and their comments. The panel members responses to this third review found all panel members in agreement, and the content and organization of the checklist was finalized (Appendix D).

Orientation Evaluation Form

A preliminary draft of an orientation evaluation form was comprised of five general questions. The first review by the panel members resulted in suggestions to provide additional space for comments, and to add a sixth general question. Based upon these suggestions the evaluation form was revised and submitted to the panel for a second review. Following this second review it was suggested that lines be placed in the space provided for comments.

A third revision, incorporating these recommendations, was submitted to the panel members of their review. No additional changes were recommended and the final form was adopted (Appendix E).

Summative Evaluation

The summative evaluation and validation of the final products of this developmental study were conducted by having the panel members judge content, organization, and format. Consensus and agreement was reached with all panel

members accepting the final products in both substance and format.

Chapter 5

DISCUSSION, CONCLUSION, IMPLICATIONS, AND RECOMMENDATIONS

Discussion

The purpose of this study was to develop a product, in the form of the contents of an orientation program, for newly hired nurses within RSC health services. The design utilized for this study was a developmental problem-solving methodology with a review of the literature, a survey of other California community college health services, a selected panel of judges from within RSC health services, and the use of a modified Delphi technique for formative and summative data collection. As stated by Grizzle (1990), a developmental study is based on supportive information obtained from similar settings. The use of a survey questionnaire provided a knowledge base of what other college health services have done to orient new nurses.

The literature encourages the active participation of staff members (Haggard, 1984; Schultz & Johnson, 1990; Webb et al, 1987; Williams, 1992), which can lead to valuable ideas, ownership as stakeholders, and facilitate support, interest, and participation in the process and the product developed. The design of this study permitted RSC health services staff members, who were selected as panel judges, to offer suggestions and feel ownership during formation of the product. Their interest and motivation was emphasized

by comments such as "this is great - it'll help us to know what we should be doing with new people", "this will help new nurses and us", and "this was well worth the time - we need orientation guidelines". By including staff members in the development of this product they were able to offer invaluable input and suggestions. The implementation of the design of this study was successful and supported the discussion presented in the literature, with the positive outcome of staff involvement and participation in the product development.

As discussed in the literature by Huang and Schoenknecht (1984), Snook (1992), Webb et al (1987), and Wolper and Pena (1987), an orientation program manual is a helpful tool to structure and organize the contents of an orientation program. By organizing orientation content into a manual new staff members are provided with essential written information such as institutional and departmental philosophy and goals, job descriptions, and specific job duties. An orientation program for nurses is enhanced by the use of a manual (Snook, 1992; Webb et al, 1987; Wolper & Pena, 1987). This manual should include content related to a structured, organized and sequential orientation. Recommended items to be included are: (1) a skills inventory to determine competencies and learning needs of new staff members (Addams, 1988; Assay & Maciariello, 1991; Haggard, 1984; Schultz & Johnson, 1990); (2) an orientation

checklist to monitor acquisition of skills and procedures, and to identify progress towards completion of the orientation (Haggard, 1984; Huang & Schoenknecht, 1984; Swansbury, 1990); and (3) an evaluation to measure the success of the orientation program (Haggard, 1984; Schultz & Johnson, 1990). The survey results of California community college health services found minimal use of an orientation program manual. The use of content items, such as a skills inventory, an orientation checklist, and an orientation evaluation were developed for the current study based on the review of the literature.

Orientation provides a transition period and allows new staff members to adapt and become familiar with the new setting and their new role (Barnum & Mallard, 1989; Brown, 1987; Cascio, 1986; Douglas, 1992; Nowark & Grindel, 1984). This in turn leads to optimum employee effectiveness and promotes departmental efficiency in a relatively short period of time (Arthur, 1991; Caruth et al, 1988; Haggard, 1984; Seyfarth, 1991; Snook, 1991). As emphasized by Caruth et al (1988), Douglas (1992), Swansburg (1990), and Wolper & Pena (1987), an orientation program encompasses the learning of new tasks and skills, policies and procedures, and role expectations for new staff members.

The development of an orientation program manual content list, a skills inventory, an orientation checklist, and an orientation evaluation were the product outcomes of

this developmental study. The research question was answered by the development of these products. As a result of this study RSC health services now has valid and useable content for an orientation program manual.

The objectives of this study were successfully met.

Objective 1:

This study did increase staff awareness and comprehension of the purpose and need to develop the content of a health services orientation program manual. As a result of this study, participating staff members understand the purpose and necessity of such a manual. The product developed, as an outcome, enabled staff members to recognize the need for a planned and structured orientation to guide and direct the orientation process. Staff members now comprehend how such a manual will benefit both new nurses and themselves, as active participants, in the orientation process.

Objective 2:

The design of this study, by selecting staff members as panel judges, provided for their interest and motivation to collaboratively participate in the formation of a departmental orientation program manual. The panel members created and developed the product of this study, which facilitated their interest, motivation and sense of ownership.

Objective 3:

The staff members selected as panel judges participated in identifying what should be included in an RSC health services orientation program manual for new nurses. The products developed included a manual content listing, a skills inventory, an orientation checklist, and an orientation evaluation form.

Objective 4:

The products developed, as the outcome of this study, successfully met the stated purpose and objectives. RSC health services now has the content for a valid and useable orientation program manual for newly hired nurses.

Conclusions

The purpose of this study was the development of the contents of a planned and structured orientation program manual for newly employed nurses within RSC health services. The design followed suggestions found in the literature, and which was successful. The process implemented proved viable, and produced a valid product. The product was developed from collaborative staff participation, acting as panel judges.

An additional outcome of this study was staff awareness and understanding of the need for a departmental orientation program manual, as well as their interest and motivation to participate in identifying the necessary content. The success of this study was dependent upon staff interest and

motivation in their role as panel judges. This study was able to accomplish this, and successfully met its intended purpose and objectives.

Implications

The implications of the outcome of this study was the development of a realistic, useable, and valid product developed by staff, for staff. The product, the contents of an orientation program manual, will become the basis for the subsequent orientation of newly hired nurses. As a result of this study the purpose and objectives of the product developed were accomplished.

The implication of the outcome of this study is that the mechanism is now in place to implement a planned and structured orientation program for new nurses. The contents of an orientation program manual, as the product of this study, is developed and ready for implementation. Participation of staff members was essential to the success of this study, and facilitated implementation of a valid and useable contents of an orientation program manual. Consequently, departmental efficiency and effectiveness can be increased with a smooth transition and induction of newly hired nurses in learning their role, responsibilities and performance expectations within RSC health services.

Recommendations

It is recommended that the products developed as a result of this study be used to implement an RSC health

services orientation for newly hired nurses. It is further recommended that:

1. This study be disseminated to all RSC health services nursing staff. This will provide for their awareness and comprehension of the need and utilization of a departmental orientation program manual.

2. Staff participation and collaboration be continued for further development, with refinement, of the content of this orientation program manual.

3. The orientation program manual developed be shared with other California community college health services managers for potential adaptation in their setting.

4. The orientation progam manual developed, once implemented, be evaluated for further refinement and utility by newly employed nurses.

5. The processes utilized in this study be replicated to develop an RSC health services orientation program manual for clerical staff.

6. Further development of the orientation program manual, with staff participation and collaboration, in the sequencing of the orientation process.

REFERENCES

American College Health Association (1990). College health 2000. Rockville, MD: The American College Health Association.

Addams, H. L. (1988). "Up to speed in 90 days: An orientation plan". In A. D. Timpe. (Ed.). Managing people: The art and science of business management, (pp. 124-128). New York: Facts on File

Arthur, D. (1991). Recruiting, interviewing, selecting and orienting new employees (2nd ed.). New York: AMACON.

Asay, L. D., & Maciariello, J. A. (1991). Executive leadership in health care. San Francisco: Jossey-Bass.

Barnum, B. S., & Mallard, C. O. (1989). Essentials of nursing management: Concepts and context of practice. Rockville, MD: Aspen.

Brown, R. B. (1987). Human resource problem solving. Englewood Cliffs, NJ: Prentice-Hall.

Buickus, B. A. (1984, September). "Orientation: We're with you all the way". Nursing Management, 15(9), 40-45.

Butler, J. E., & Ferris, G. R., & Napler, N. K. (1987). Strategy and human resources management. Cincinnati, South-Western.

Caruth, D. L., & Noe, R. M., III, & Mondy, R. W. (1988). Staffing the contemporary organizations: A guide to planning, recruiting, and selecting for human resource professionals. New York: Quorum Books. OH:

Cascio, W. F. (1986). Managing human resources. New York: McGraw-Hill.

Cascio, W. F. (1987). Applied psychology in personnel management (3rd ed.). Englewood Cliffs, NJ: Prentice-Hall.

DeCenzo, D. A., & Robbins, S. P. (1988). Personnel/Human resource management. Englewood Cliffs, NJ: Prentice-Hall.

Dienemann, J. A. (1990). Nursing administration: Strategic perspectives and application. Norwalk, CT: Appleton and Lange.

Douglas, L. M. (1992). The effective nurse: Leader and manager (4th ed.). St. Louis: Mosby.

Fowler, A. (1983). Getting off to a good start: Successful employee induction. Plymouth, Great Britain: Institute of Personnel Management.

Galindez, E. A. (1990, September-October). "An orientation model for correctional health nursing". Journal of Nursing Staff Development, 6:5, 225-227).

Grizzle, G. (1990). How to build a better mousetrap: A guide to the development problem solving methodology. Paper presented at the Nova University, Summer Institute. Ft. Lauderdale, FL.

Haggard, A. (1984). Hospital orientation handbook for nurses and allied health professionals. Rockville, MD: Aspen.

Heisler, W. J., & Jones, W. D., & Benham, P. O., Jr. (1988). Managing human resources issues: Confronting challenges and choosing options. San Francisco: Jossey-Bass.

Hersey, P., & Blanchard, K. H. (1988). Management of organizational behavior: Utilizing human resources (5th ed.). Englewood Cliffs, NJ: Prentice-Hall.

Holoviak, S. J., & Sipkoff, S. S. (1987). Managing human productivity: People are your best investment. New York: PRAEGER.

Huang, S. H., & Schoenknecht, H. D. (1984, September). "Contracts individualize orientation". Nursing Management, 15:9, 53-57.

Issac, S., & Michaels, W. B. (1981). Handbook in research and evaluation: For education and behavioral sciences (2nd ed.) San Diego: EdITS.

Jedamus, P., & Peterson, M. W., & Associates (1986). Improving academic management: A handbook of planning and institutional research. San Francisco: Jossey-Bass.

Nadler, L., & Nadler, Z. (1990). The handbook of human resource development (2nd ed.). New York: Wiley and Sons.

Nardecchia, M. A. & Myers, M. T. (1980, Fall). "The Policy Manual: A Basis for Legal Protection". Nursing Administration Quarterly, 5, 57-62.

Nowak, J. B., & Grindel, C. G. (1984). Career planning in nursing. Philadelphia: Lippincott.

O'Conner, A. B. (1986). Nursing staff development and continuing education. Boston: Little, Brown, and Co.

Patterson, C. H., & Kranz, D., & Brandt, B. (1986). A guide to JCAH nursing services standards. Chicago: Joint Commission of Accreditation of Hospitals.

Rancho Santiago College (1992). Enrollment trends and student characteristics. Santa Ana, CA: Office of Research, Planning, and Resource Development.

Rankin, G. E. (1990). Research methodology: A study guide for the core seminar. Ft. Lauderdale, FL: Nova University.

Rebore, R. W. (1991). Personnel administration in education: A management approach (3rd ed.). Englewood Cliffs, NJ: Prentice-Hall.

Robinson, V., & Woolf, P. L. (1991, July). Guide to the practicum process. Ft. Lauderdale, FL: Nova University.

Schultz, R., & Johnson, A. C. (1990). Management of hospitals and health services: Strategic issues and performance (3rd ed.). St. Louis: Mosby.

Seyfarth, J. T. (1991). Personnel management for effective schools. Boston: Allyn and Bacon.

Snook, I. D., Jr. (1992). Hospitals: What they are and how they work, (2nd ed.). Gaithersburg, MD: Aspen.

Swansburg, R. C. (1990). Management and leadership for nurse managers. Boston: Jones and Bartlett.

Tappen, R. M. (1986). Nursing leadership: Concepts and practice. Philadelphia: Davis.

Treece, E. W., & Treece, J. W., Jr. (1987). Elements of research in nursing (3rd ed.). St. Louis: Mosby.

Webb, L. D., & Geer, J. Y., & Montello, P. A., & Norton, M. S. (1987). Personnel administration in education: New issues and new needs in human resource management. Columbus, OH: Merrill

Williams, R. D. (1992, January 24). "Quality teamwork: New faculty orientation". In Roueche, S. D. (Ed.). Innovation Abstracts, Report 14:1. University of Texas at Austin: National Institute for Staff and Organizational Development.

Wolper. L. F., & Pena, J. J. (1987). Health care administration: Principles and practices. Rockville, MD: Aspen.

APPENDICES

APPENDIX A

SURVEY QUESTIONNAIRE

May 4, 1992

Dear Director of Health Services:

Our Health and Wellness Center is conducting a small survey to determine the essential components of a health services orientation program for registered nurses. As your institution is located in an urban area, with a diverse student population, your health center has been selected as a participant in this survey.

Your cooperation in completing the enclosed questionnaire is vital to the successful outcome of this survey. It will take approximately ten minutes of your time. Please complete and return this questionnaire by May 22, 1992. A stamped return envelope is enclosed.

Your anonymity and confidentiality will be maintained. No college will be identified in the results obtained.

If you have any questions I can be reached at (714) 564-6219. If you would like a copy of the results mailed to you, please complete the enclosed Request for Results form.

Thank you for your time and participation in this survey.

Respectfully,

Sheila Rockoff, MSN, RN
Coordinator, Health Services

College Health Services
Orientation Program for Nurses
Survey Questionnaire

Directions: Select your response to each item asked and circle yes, no, or not applicable (NA) as indicated.

1. Who is/are the person(s) responsible for the overall planning, directing, and organizing of your orientation program?

   yes no 1. Director/Coordinator
   yes no 2. Assistant to the Director/Coordinator
   yes no 3. Staff nurse

   IS SOMEONE NOT MENTIONED WHO IS RESPONSIBLE? Please explain.

   _____

   _____

2. Do you use any of the following preceptorship methods to orient your new nurses?

   yes no 1. buddy system with multiple staff nurses
   yes no 2. buddy system with one specific staff nurse
   yes no 3. on-the-job training, with no structured orientation

   ARE ANY METHODS NOT MENTIONED THAT YOU USE? Please explain.

   _____

   _____

3. Various methods can be used to assess the skills, competency, and learning needs of new nurses. Do you use any of the following methods?

   yes no 1. skills inventory checklist
   yes no 2. interview with the new nurse
   yes no 3. self-report by the new nurse
   yes no 4. observation of clinical performance

   ARE ANY METHODS NOT MENTIONED THAT YOU USE? Please explain.

   _____

   _____

4. Do you use any of the following methods to teach necessary clinical skills, such as ear lavage or venipuncture for lab tests?

yes no 1. use of films or videotapes
yes no 2. refer to reading literature or journal articles on the subject
yes no 3. demonstration with instruction
yes no 4. supervised performance of the procedure

ARE ANY METHODS NOT MENTIONED THAT YOU USE? Please explain.

_____

_____

5. Do you use any of the following items to orient your new nurses?

yes no 1. policy and procedure manual
yes no 2. employee handbook
yes no 3. skills inventory checklist
yes no 4. organizational chart of your department
yes no 5. organizational chart of your institution
yes no 6. job descriptions
yes no 7. philosophy of your department
yes no 8. philosophy of your institution
yes no 9. objectives of your orientation program
yes no 10. map of your campus
yes no 11. scavenger hunt
yes no 12. daily work routine and duties
yes no 13. orientation checklist
yes no 14. orientation manual

ARE ANY ITEMS NOT MENTIONED THAT YOU USE? Please explain.

_____

_____

6. Do you use any of the following methods to assess the readiness of a nurse to conclude orientation and function with minimal supervision?

yes no 1. self-report by the new nurse
yes no 2. interview with the new nurse
yes no 3. completion of an orientation checklist
yes no 4. observation of clinical performance

ARE ANY METHODS NOT MENTIONED THAT YOU USE? Please explain.

_____

_____

7. Do you use any of the following evaluation methods to determine the effectiveness of your orientation program to prepare new nurses for their role and responsibilities?

yes no 1. written questionnaire
yes no 2. interview with the new nurse
yes no 3. observation of clinical performance
yes no 4. a written post-test
yes no 5. performance evaluation

ARE ANY METHODS NOT MENTIONED THAT YOU USE? Please explain.

_____

_____

This concludes the survey. Is there anything regarding the orientation of new nurses you would like to mention?

_____

_____

_____

_____

_____

_____

_____

****

THANK YOU FOR YOUR TIME AND PARTICIPATION IN THIS SURVEY

If you would you like a copy of the results when available please complete the enclosed Request for Results form. Return this form with your questionnaire in the envelope provided, or if you prefer, mail separately to:

Sheila Rockoff, MSN, RN
Coordinator, Health Services
Rancho Santiago College
1530 West Seventeenth Street
Santa Ana, CA 92706

REQUEST FOR RESULTS
Health Services Orientation Program for Nurses
Survey Questionnaire

Please complete this form if you would you like a copy of the results mailed to you. Return this form with your questionnaire in the envelope provided, or if you prefer, mail separately to me at:

Sheila Rockoff, MSN, RN
Coordinator, Health Services
Rancho Santiago College
1530 West Seventeenth Street
Santa Ana, CA 92706

Name: _____

Title: _____

College: _____

Street: _____

City: _____ Zip: _____

APPENDIX B

CONTENT LIST

RSCCD HEALTH SERVICES
ORIENTATION MANUAL

TABLE OF CONTENTS

DISTRICT:

- Mission statement
- Philosophy and goals
- Institutional organizational chart
- Map of campus

HEALTH SERVICES:

- Health services philosophy
- Health services goals and objectives
- Health services organizational chart
- Job descriptions
  - coordinator
  - college nurse
  - intermediate clerk
- Shift duties and responsibilities
  - morning shift
  - afternoon shift
  - evening shift

ORIENTATION ITEMS:

- Skills inventory (assessment of learning needs)
- Orientation checklist (orientation guide)
- Orientation Evaluation (complete at end of orientation)

APPENDIX C

SKILLS INVENTORY

RSCCD HEALTH SERVICES
SKILLS INVENTORY

Name: _____ Date: _____

Clinical Procedure	No Experience	Would Like Supervision	Confident
Clinical skills:			
audiometry hearing test	____	____	____
ear lavage	____	____	____
immunizations	____	____	____
PPD administration	____	____	____
venipuncture	____	____	____
vision testing	____	____	____
wound care	____	____	____
First-Aid treatment:			
ankle/wrist injuries	____	____	____
arm/leg injuries	____	____	____
burns	____	____	____
cuts	____	____	____
eye injury	____	____	____
lacerations	____	____	____
Health Teaching:			
BCP	____	____	____
BSE	____	____	____
cholesterol	____	____	____
condom use	____	____	____
hypertension	____	____	____
nutrition (low fat, low cholesterol)	____	____	____
STD's	____	____	____
Counseling:			
crises (emotional/psychological)	____	____	____
family planning methods	____	____	____
unplanned pregnancy	____	____	____

APPENDIX D

ORIENTATION CHECKLIST

RSCCD Health Services
NURSING ORIENTATION CHECKLIST

Name: _____ Employment Date: _____

Directions: Check-off each item as it is explained, demonstrated, or shown to you. This list is your orientation guide to help you become familiar and comfortable with our Health and Wellness Center. Use the available space to make notes.

I. GENERAL INFORMATION

Orientation program
- ____ goals and objectives
- ____ orientation packet

Institution
- ____ philosophy and mission
- ____ goals and objectives
- ____ governance structure
- ____ organizational chart

Health Services Department
- ____ philosophy
- ____ goals and objectives
- ____ organizational chart

Work Schedule
- ____ shift and hours
- ____ academic calendar
- ____ holidays
- ____ time sheets/pay day
- ____ staffing schedule

Job Descriptions
- ____ Coordinator
- ____ H.S. Nurse
- ____ College nurses
- ____ Clerks

Communications
- ____ staff mail
- ____ bulletin boards
- ____ outgoing mail

Campus tour
- ____ key buildings and mail areas
- ____ location of key departments

Employee policies
- ____ department keys
- ____ parking permit
- ____ dress code
- ____ absent/time off

II. HEALTH SERVICES FACILITY

Front office/receptionist area
- ____ Waiting room/reception area
- ____ Appointment books:
  - ____ medical/nurse appointments
  - ____ psychologist/counseling appointments
- ____ patient sign-in sheet
- ____ VCR
- ____ videotape library
- ____ health literature
- ____ insurance information
- ____ first-aid kit log book
- ____ health literature
- ____ insurance information

Active chart files:
- ____ individual MD/psychologist
- ____ nurse slot - follow up action
- ____ lab pending
- ____ PPD's to be read
- ____ incident reports for Sheila to review

Clerical area
- ____ clerical supplies
- ____ xerox machine
- ____ medical records/charts
- ____ forms
- ____ videotape library
- ____ lab printer
- ____ second radio transmitter/receiver

Exam rooms
- ____ operation of exam tables
- ____ supplies
- ____ equipment:
  - ____ otoscope
  - ____ ophthalmoscope
  - ____ lighted speculum

Bathroom
- ____ emergency pull cord
- ____ specimen containers
- ____ two-sided door locks

Quiet Room
- ____ supplies
- ____ equipment
- ____ operation of the cots

Hallway
- ____ locked medicine cabinet
- ____ emergency supplies and equipment
- ____ oxygen
- ____ blanket
- ____ wheelchair

Triage Interview area
- ____ history and physical form
- ____ referral slips
- ____ pamphlets
- ____ vital signs/weight

Laboratory area
- ____ microscope
  - ____ operation/cleaning
  - ____ wet mount slides
  - ____ vaginal smears
  - ____ UA slides
- ____ lab supplies - bins and drawers
- ____ lab fee book
- ____ lab requisition slips
- ____ centrifuge - operation and handling
- ____ specimen handling - bagging and disposal
- ____ specimen refrigerator
- ____ venipuncture tray
- ____ injection tray

Sterilization
- ____ cold: chemical
- ____ heat: steam autoclave
  - ____ packaging instruments
  - ____ labeling protective covers

Communication equipment
- ____ telephone and voice mail system
- ____ computer system
- ____ emergency radio system:
  - ____ storing/re-charging
  - ____ use/codes

Medical equipment
- ____ oxygen
- ____ suction
- ____ incubator

Supplies
- ____ storage room
- ____ orthopedic (splints, crutches, canes, etc.)
- ____ medications
- ____ dressings
- ____ ear tray
- ____ eye tray
- ____ bandages
- ____ medication refrigerator
- ____ emergency bag and supplies

Storage room/extra supplies
- ____ shelves
- ____ boxes

Emergency Cart
- ____ garaging
- ____ keys
- ____ driving and parking
- ____ maintenance/battery re-charging
- ____ map of campus locations
- ____ campus tour/building access

Medications
- ____ OTC
- ____ prescriptions drugs
- ____ emergency drugs
- ____ immunizations
- ____ PPD
- ____ tetanus (Td)
- ____ oral contraceptives

Physician Office
- ____ set-up
- ____ mail folders
- ____ prescription pads
- ____ reference books

Psychological counseling room
- ____ dual purpose room
- ____ set-up (lighting)

Nurses Station
- ____ supplies
- ____ chart forms
- ____ reference books
- ____ referral files/sources
- ____ departmental manuals
- ____ health materials, literature
- ____ standing orders
- ____ nurse mail slots
- ____ lab book and lab "holds"
- ____ daily tallies
- ____ equipment loan log book
- ____ carts (gynecology and surgical)
- ____ laundry bin
- ____ lab fee booklet/sheet

Consultation area (triage)
- ____ health teaching literature
- ____ vital signs
- ____ assessments
- ____ history & physical forms
- ____ referral forma

First-Aid treatment area
- ____ supplies
- ____ lamp
- ____ solutions

Staff room
- ____ juice/tea
- ____ ice bags and covers
- ____ cleaning supplies

III. POLICIES AND PROCEDURES

Manuals
- ____ policy and procedure manual
- ____ standing orders
- ____ disaster-emergency protocol

Dispensing medications
- ____ OTC
- ____ prescription drugs
- ____ written prescriptions
- ____ telephone calls to/from pharmacy's

Referrals
- ____ x-rays
- ____ clinics and community agencies
- ____ county mental health agency
- ____ physicians/psychologists/psychiatrists
- ____ alcohol/drug agencies

Emergency medical transport
- ____ paramedics
- ____ ambulance
- ____ Doctor's Hospital emergency room
- ____ taxi voucher system

Mental-Emotional crisis
- ____ on-campus crisis intervention team
- ____ campus security officers
- ____ off-campus referral

Report of injury/accident
- ____ policy eligibility and coverage
- ____ student - student insurance claim form
- ____ employee - worker's comp report
- ____ visitor (non-student/non-employee) - reporting

Charting forms
- ____ mental-emotional crisis (CIT log book)
- ____ history & physical
- ____ progress notes
- ____ lab sheets/reports
- ____ immunizations

Laboratory procedures
- ____ health services (inside) lab:
  - ____ forms
  - ____ fee sheet
  - ____ lab test request form

___ Met West Lab (outside lab):
- ___ requisition form
- ___ fee sheet
- ___ pick-up schedule
- ___ reference manual
- ___ lab test request form
- ___ fax printer reports
- ___ specimen collection preparation
- ___ specimen labeling
- ___ specimen handling

IV. SPECIFIC PROTOCOLS

Infection Control
- ___ universal precautions
- ___ blood-borne contamination
- ___ body fluids and specimens
- ___ soiled dressings

Loaning equipment
- ___ log book
- ___ release form
- ___ check-out procedure
- ___ check in procedure

Laboratory procedures and tests:
- ___ pregnancy UCG
- ___ urine c/s
- ___ urine dipstick
- ___ vaginal smears
- ___ pap smears
- ___ swabs/cultures

Emergency supplies and equipment:
- ___ orange nurses bag
- ___ portable suction
- ___ portable oxygen
- ___ portable lightweight wheelchair

IV. MEDICAL RECORDS AND CHART FORMS

- ___ Filing and locator system
- ___ Office flow (clerk-nurse-clerk)
- ___ Medical chart
- ___ Psychology charts

Chart Forms:
- ___ initial face sheet
- ___ progress sheet
- ___ consent forms
- ___ log entry
- ___ laboratory log
- ___ lab test results
- ___ prescriptions
- ___ history & physical

APPENDIX E

ORIENTATION EVALUATION

RSC HEALTH SERVICES
ORIENTATION EVALUATION

Name: _____ Date: _____

1. Do you feel orientation provided you with a working knowledge of RSC Health Services departmental policies, procedures, rules, and regulations?

___ no ___ yes

Could something have been done to help you learn more? Please explain.

_____

_____

_____

_____

_____

2. Did orientation help you adjust to your role and provide you with knowledge of expectations and role performance?

___ no ___ yes

Could additional things been done to help your adjustment? Please explain.

_____

_____

_____

_____

_____

3. What part of orientation did you find most helpful? Please explain.

_____

_____

_____

_____

_____

4. What part of orientation did you find least helpful? Please explain.

5. Was the orientation manual helpful?

___ no, not at all ___ it helped a little ___ it was very helpful

What would you like to see included or left out of it?

6. What would you suggest to make the orientation program and manual more helpful to you or other new nurses?

APPENDIX F

SURVEY RAW DATA RESULTS

College Health Services
Orientation Program for Nurses
Survey Questionnaire

Directions: Select your response to each item asked and circle yes, no, or not applicable (NA) as indicated.

1. Who is/are the person(s) responsible for the overall planning, directing, and organizing of your orientation program?

(8) yes no 1. Director/Coordinator
(2) yes no 2. Assistant to the Director/Coordinator
(1) yes no 3. Staff nurse

IS SOMEONE NOT MENTIONED WHO IS RESPONSIBLE? Please explain.

_____

_____

2. Do you use any of the following preceptorship methods to orient your new nurses?

(4) yes no 1. buddy system with multiple staff nurses
(2) yes no 2. buddy system with one specific staff nurse
(5) yes no 3. on-the-job training, with no structured orientation

ARE ANY METHODS NOT MENTIONED THAT YOU USE? Please explain.

can call the coordinator at anytime if questions; we have two campuses, but

no real structured orientation

3. Various methods can be used to assess the skills, competency, and learning needs of new nurses. Do you use any of the following methods?

(1) yes no 1. skills inventory checklist
(10) yes no 2. interview with the new nurse
(6) yes no 3. self-report by the new nurse
(9) yes no 4. observation of clinical performance

ARE ANY METHODS NOT MENTIONED THAT YOU USE? Please explain.

_____

_____

4. Do you use any of the following methods to teach necessary clinical skills, such as ear lavage or venipuncture for lab tests?

(0)	yes	no	1.	use of films or videotapes
(8)	yes	no	2.	refer to reading literature or journal articles on the subject
(8)	yes	no	3.	demonstration with instruction
(9)	yes	no	4.	supervised performance of the procedure

ARE ANY METHODS NOT MENTIONED THAT YOU USE? Please explain.

use manuals as needed - standardized procedures, first-aid & health problems manuals

5. Do you use any of the following items to orient your new nurses?

(9)	yes	no	1.	policy and procedure manual
(5)	yes	no	2.	employee handbook
(1)	yes	no	3.	skills inventory checklist
(5)	yes	no	4.	organizational chart of your department
(7)	yes	no	5.	organizational chart of your institution
(9)	yes	no	6.	job descriptions
(9)	yes	no	7.	philosophy of your department
(5)	yes	no	8.	philosophy of your institution
(4)	yes	no	9.	objectives of your orientation program
(10)	yes	no	10.	map of your campus
(0)	yes	no	11.	scavenger hunt
(10)	yes	no	12.	daily work routine and duties
(2)	yes	no	13.	orientation checklist
(2)	yes	no	14.	orientation manual

ARE ANY ITEMS NOT MENTIONED THAT YOU USE? Please explain.

6. Do you use any of the following methods to assess the readiness of a nurse to conclude orientation and function with minimal supervision?

(8)	yes	no	1.	self-report by the new nurse
(10)	yes	no	2.	interview with the new nurse
(1)	yes	no	3.	completion of an orientation checklist
(10)	yes	no	4.	observation of clinical performance

ARE ANY METHODS NOT MENTIONED THAT YOU USE? Please explain.

report by nurses providing orientation

7. Do you use any of the following evaluation methods to determine the effectiveness of your orientation program to prepare new nurses for their role and responsibilities?

(0)	yes	no	1.	written questionnaire
(10)	yes	no	2.	interview with the new nurse
(9)	yes	no	3.	observation of clinical performance
(0)	yes	no	4.	a written post-test
(2)	yes	no	5.	performance evaluation

ARE ANY METHODS NOT MENTIONED THAT YOU USE? Please explain.

yearly evaluations are done

This concludes the survey. Is there anything regarding the orientation of new nurses you would like to mention?

We don't have a formal orientation - it's all done by the director

There definitely needs to be a structured orientation program for new nurses.

Being relatively new in my position, I have not yet been able to implement one, however, we are in the process of doing so at this time.

****

THANK YOU FOR YOUR TIME AND PARTICIPATION IN THIS SURVEY

If you would you like a copy of the results when available please complete the enclosed Request for Results form. Return this form with your questionnaire in the envelope provided, or if you prefer, mail separately to:

Sheila Rockoff, MSN, RN
Coordinator, Health Services
Rancho Santiago College
1530 West Seventeenth Street
Santa Ana, CA 92706